

REQUEST TO RECEIVE E-MAIL NOTIFICATION OF EFT DEPOSITS

_____ (Vendor) hereby requests that the Indiana Auditor of State (Auditor) provide all future notices of EFT deposits to Vendor's bank account via e-mail. Vendor requests that the Auditor will provide all future notices of deposits by e-mail to the Vendor's e-mail address listed below.

Vendor agrees to provide an e-mail address that can be accessed by all appropriate employees of Vendor with a need to know this information. Vendor acknowledges that it will cause disruption to the notification process if the Vendor changes its e-mail address frequently or without providing the new e-mail address to the Auditor in a timely manner. Vendor also acknowledges that if an e-mail notification sent by the Auditor to the Vendor is returned to the Auditor as undeliverable, the Auditor may remove the Vendor's e-mail address from the Auditor's e-mail notification system and Auditor will provide all future notices of EFT deposits to Vendor via U.S. Mail until the Auditor has received a correct e-mail address from Vendor.

If Vendor is not receiving the e-mail notices of EFT deposits from Auditor, Vendor agrees that it is Vendor's responsibility to contact Auditor in order for Auditor and Vendor to determine what has prevented the notices from reaching Vendor. The Auditor's ACH administrator can be reached at tlawhorn@auditor.in.gov or 317.232.3319 31. The party signing this form represents that he/she has authority to complete this form on behalf of Vendor.

Date: _____ Taxpayer Identification Number _____

Name of Vendor: _____

Address: _____

City: _____ State: _____ Zip: _____

By: _____ signature of party signing on behalf of Vendor

printed name _____

title _____

email address to receive deposit notifications (*Please print*): _____

name of contact person at Vendor's office _____

work phone number _____